

APPLICATION FOR FIREFIGHTERS PLATES

I, _____
of _____,
(STREET) (TOWN) (ZIP CODE)

an active member of the _____ Fire Department, hereby make application for a firefighter plate and enclosed is the *one-time \$5.00 plate fee* and a *copy of my current registration* to which the plate will be assigned. I fully understand should I cease to be a firefighter, I shall immediately surrender my firefighter plates to the Secretary of State.

(SIGNATURE)

FIRE CHIEF'S CERTIFICATE

I hereby certify that the person above named is an active member of the _____ Fire Department. I understand that should this person cease to be a member of this Fire Department, I will notify the Secretary of State, Bureau of Motor Vehicles. I have assigned plate number _____ to the above firefighter.

(SIGNATURE)

(TITLE)

NOTE: The vehicle to which the firefighter plate will be assigned must be registered in the name of the active firefighter. The special registration plate for firefighters may be used only on one motor vehicle. The gross vehicle weight of this vehicle may not exceed 9,000 pounds. (29-A MRSA, §519)

Please submit the completed application, along with the \$5.00 fee and a photocopy of your current registration to:

*Specialty Plate Clerk
Bureau of Motor Vehicles
29 State House Station
Augusta, ME 04333-0029*

PLEASE MAKE CHECK PAYABLE TO THE SECRETARY OF STATE